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EXPEDITED MEDICAL STAFF APPOINTMENT PROCESS

1. PURPOSE: The purpose of this Veterans Health Administration (VHA) Directive is to provide guidance for use of The Joint Commission on the Accreditation of Health Care Organizations' (JCAHO) Expedited Medical Staff Appointment process. This is being done in response to the Backlog Reduction Work Group charged by the Secretary of Veterans Affairs. This process may be implemented by VHA medical treatment facilities if they choose to do so.

2. BACKGROUND

a. Accreditation standards permit expediting appointments and granting privileges to licensed independent providers. This process, when incorporated by reference into the appropriate VHA medical treatment facility Bylaws, policy or procedures will assist in expediting the medical staff appointment process and is consistent with VHA policy and the accreditation standards.

b. The JCAHO criteria for Medical Staff Membership and Clinical Privileges are outlined in the Medical Staff Standards. Medical Staff Standards 5.4, 5.4.1, 5.4.2, and 5.4.3, outline these requirements. According to JCAHO's published intent statement, four core criteria are essential to establishing and maintaining a qualified and competent medical staff:

- (1) Current licensure;
- (2) Relevant training or experience;
- (3) Current competence; and
- (4) Ability to perform the privileges requested.

c. Medical Staff Standards 5 and 5.1.3 address the governing body requirements for an expedited appointment:

(1) "To expedite appointment, reappointment, or renewal or modification of clinical privileges, the governing body may delegate the authority to render those decisions to a committee consisting of at least two governing body members. Following a positive recommendation from the Medical Staff Executive Committee on an application, the committee of the governing body reviews and evaluates the qualifications and competence of the practitioner applying for appointment, reappointment, or renewal or modification of clinical privileges and renders its decision. A positive decision by the committee results in the status or privileges requested. The committee shall meet as often as necessary, as determined by its chairperson. The full governing body considers and, if appropriate, ratifies all positive committee decisions at its next regularly scheduled meeting. If the committee's decision is adverse to an applicant, the matter is referred back to the Medical Staff Executive Committee for further evaluation."

(2) "An applicant is usually ineligible for the expedited process if at the time of appointment, or if since the time of reappointment, any of the following has occurred:

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- (a) The applicant submits an incomplete application;
- (b) The Medical Staff Executive Committee makes a final recommendation that is adverse or with limitation;
- (c) There is a current challenge or a previously successful challenge to licensure or registration;
- (d) The applicant has received an involuntary termination of medical staff membership at another organization;
- (e) The applicant has received involuntary limitation, reduction, denial, or loss of clinical privileges; or
- (f) There has been a final judgment adverse to the applicant in a professional liability action.”

3. POLICY: It is VHA’s policy that all individuals who are permitted by law and the facility to provide patient care services independently will be credentialed in accordance with VHA Handbook 1100.19, Credentialing and Privileging, dated March 6, 2001. The policy requires that practitioners must be fully credentialed and privileged prior to initial appointment. The only exceptions to this process are in the case of Temporary Appointments for Urgent Patient Care Needs and Emergency Appointments in response to disaster, which are not addressed in this policy.

4. ACTION: VHA medical treatment facilities may incorporate by reference the following process into the Medical Staff Bylaws, policy or procedures for an expedited appointment process for medical staff appointments not to exceed 30 workdays during which time full credentialing must be completed. This process will assist in expediting the medical staff appointment process.

a. Critical to the implementation of the Expedited Appointment is the commitment of VHA medical treatment facility managers to assuring the timely completion and submission of the credentials information package through VetPro, VHA’s electronic credentials program, with the necessary local facility supplements. The credentialing process cannot begin until the licensed independent provider completes the credentials package. JCAHO requires that there be a complete application for an expedited appointment, therefore the provider must submit this information through VetPro and documentation of credentials must also be retained in VetPro.

b. Credentialing requirements for this process would include confirmation of:

(1) The practitioner's education and training (which, if necessary, can be accomplished in 24 hours through the purchase of the American Medical Association’s Practitioners Profile);

(2) One active, current, unrestricted license verified by the primary source State, Territory, or Commonwealth of the United States or in the District of Columbia; **NOTE:** *To be eligible for appointment to a position listed in Title 38 United States Code (U.S.C.), Section 7402(b), an applicant or employee must meet its statutory licensure requirements for the position. In*

addition, a person may not be employed in any position under Title 38 U.S.C., Section 7402(b) (other than as a Director of a hospital, domiciliary, center or outpatient clinic), if the person is or has been licensed, registered, or certified in more than one State, and either (1) any of those States has terminated such license, registration or certification for cause, or (2) the person has voluntarily relinquished such license, registration, or certification in any of those States after being notified in writing by that State of potential termination for cause. See Title 38 U.S.C., Section 7402(f).

(3) Confirmation on the declaration of health, by a practitioner designated by or acceptable to the facility, of the applicant's physical and mental capability to fulfill the requirement of the clinical privileges being sought;

(4) Query of licensure history through the Federation of State Medical Boards Action Data Center;

(5) Confirmation from two peer references who are knowledgeable of and confirm the practitioner's competence, including at least one from the current or most recent employer(s) or institution(s) where the applicant holds or held privileges or who would have reason to know the individual's professional qualifications;

(6) Current comparable privileges held in another institution; and

(7) National Practitioner Data Bank query.

c. If all credentialing elements are reviewed and no current or previously successful challenges to any of the credentials are noted, and there is no history of malpractice payment, a delegated subcommittee of the Executive Committee of the Medical Staff, consisting of at least two members of the full committee, may recommend appointment to the medical staff. Full credentialing will be completed within 30 workdays and presented to the Executive Committee of the Medical Staff for ratification.

NOTE: *The expedited appointment process may only be used for what are considered to be "clean" applications. The expedited appointment process can not be used if the application is not complete (including answers to Supplemental Questions, Declaration of Health, and Bylaws Attestation); there are any current or previously successful challenges to licensure; ANY history of involuntary termination of medical staff membership at another organization, received involuntary limitation, reduction, denial, or loss of clinical privileges; or there has been a final judgment adverse to the applicant in a professional liability action.*

d. This recommendation by the delegated subcommittee of the Executive Committee of the Medical Staff will be acted upon by the VHA medical treatment facility Director. The 30 workdays for the completion of the full credentialing process begins with the date of the Director's signature.

e. This process does not relieve the local VHA medical treatment facilities from reviewing the Department of Health and Human Services, Office of Inspector General's sanction list and

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determining that the provider has not been excluded from receiving or directing the expenditure of Federal health care dollars.

f. The expedited appointment to the medical staff process does not relieve VHA medical treatment facilities from any human resources appointment requirements. See VA Handbook 5005, Staffing.

g. For those providers where there is evidence of a current or previously success challenge to any credential or any current or previous administrative or judicial action, the expedited process cannot be used and complete credentialing must be accomplished for consideration by the Executive Committee of the Medical Staff.

h. This is a one-time appointment process for initial appointment to the medical staff and may not exceed 30 workdays. It may not be extended or renewed. The complete appointment process must be completed within 30 workdays of the Expedited Appointment or the medical staff appointment will automatically be terminated.

5. REFERENCES:

- a. VHA Handbook 1100.19, Credentialing and Privileging.
- b. Title 38 U.S.C., Sections 7402(b) and (f).
- c. VA Handbook 5005, Staffing.

6. FOLLOW-UP RESPONSIBILITY: The Office of Quality and Performance (10Q) is responsible for the content of this Directive.

7. RESCISSIONS: None. This VHA Directive expires November 30, 3007. This VHA Directive will be incorporated in VHA Handbook 1100.19, Credentialing and Privileging.

Robert H. Roswell, M.D.
Under Secretary for Health

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